

**STATE OF SOUTH DAKOTA  
Bingo/Lottery Distributors  
GROSS RECEIPTS TAX RETURN**

Month for which this return is being filed: \_\_\_\_\_

**NOTE:** Return is due on the 15th day of the month following the month in which receipts are received from the sale of bingo/lottery equipment and supplies

\_\_\_\_\_  
**Name of Taxpayer**                      **License Number**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City**                                      **State**                                      **Zip**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ **Telephone Number** \_\_\_\_\_

**1. Gross Sales** ..... \$ \_\_\_\_\_

**2. Tax Rate (5%)** ..... \$ \_\_\_\_\_ X .05

**3. Total (Multiply line 1 by line 2)**        \$ \_\_\_\_\_

**MAIL TO: South Dakota Department of Revenue, Box 5055, Sioux Falls, South Dakota 57117**